

1. APPLICATION TYPE (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Official Community Plan Amendment | <input type="checkbox"/> Regional Growth Strategy Amendment |
| <input type="checkbox"/> Rezoning/Zoning Amendment | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Land Use Contract Discharge/Amendment | <input type="checkbox"/> Strata Title Conversion |
| <input type="checkbox"/> Development Variance Permit | <input type="checkbox"/> Temporary Use Permit |
| <input type="checkbox"/> Development Permit | <input type="checkbox"/> Agricultural |
| Type: _____ | Type: _____ |
| <input type="checkbox"/> Telecommunications (Non-DP) | <input type="checkbox"/> Liquor Licence |
| <input type="checkbox"/> Heritage: Revitalization Agreement/
Alteration Permit/Covenant | <input type="checkbox"/> Restrictive Covenant: Amendment/
Discharge/New |

2. SITE DESCRIPTION

Address(es): _____

PID(s): _____

- Agricultural Land Reserve
 Heritage Site
 Archaeological Interest Area

3. APPLICANT

Name: _____

Business Name: _____

Applicant Is: Owner Architect Agent Contractor Other (specify): _____

Mailing Address: _____

City: _____ Postal Code: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Signature*: _____ Date: _____

*By signing the above, I hereby agree to the terms contained in this Application Form and declare that the information submitted in support of this application is, to the best of my knowledge, true and correct in all respects. I also acknowledge that additional information may be required as part of the application process.

4. APPLICATION DESCRIPTION

Existing

OCP Designation

Schedule A: _____

Local Area Plan: _____

Zoning: _____

Proposed

OCP Designation

Schedule A: _____

Local Area Plan: _____

Zoning: _____



Development Permit Area(s): _____

Heritage Conservation Area: _____

Variance(s) Required: _____

Current Use: _____

Proposed Use: _____

5. SUBMISSION REQUIREMENTS

Applications must be accompanied with all supporting information required. Refer to the *Land Use and Development Application Requirements* handout for guidance. Incomplete applications cannot be processed until all required information is collected. The City of Delta reserves the right to retain on file plans and materials submitted in connection with development applications.

6. PUBLIC NOTICE SIGNAGE

Applicants may be required to post one or more signs on the subject site, at their expense, in accordance with the City of Delta's policy. Signage details will be provided by planning staff.

7. TREES/LANDSCAPING

The applicant hereby acknowledges that owner(s) of the subject site is/are responsible for the costs associated with street trees, on-site tree retention and replacement and on-site landscaping.

8. PARKLAND DEDICATION

Subdivision applications creating 3 or more new lots will require 5% parkland dedication or cash-in-lieu, as determined by the City of Delta.

9. LEGAL COSTS

The applicant hereby agrees to assume all legal costs directly incurred by the City of Delta through the processing or approval of this application and the preparation and registration of any related legal documents.

10. DEVELOPMENT COST CHARGES

The applicant hereby acknowledges that Development Cost Charges may be required by Metro Vancouver, and by the City of Delta in accordance with the *Delta Development Cost Charges Imposition Bylaw No. 5830, 2000, as amended*.

11. ENGINEERING SERVICES

The applicant hereby acknowledges that a Development or Servicing Agreement may be required in accordance with the *Delta Subdivision and Development Standards Bylaw No. 5100, 1994, as amended*.



12. OWNER AUTHORIZATION

This part must be signed by all owner(s) of the subject site. For strata properties, owner authorization must also be obtained from the Strata Council. If more than two owners of the property(s) are involved, please attach additional sheets.

I/We hereby consent to the submission of this development application and hereby authorize the designation of the applicant as stated in Part 3 of this application.

Name of Owner: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Signature of Owner Date

Name of Signatory (Please print)

Name of Owner: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Fax: _____

Cell: _____ Email: _____

Signature of Owner Date

Name of Signatory (Please print)

For Office Use Only	
Application No.: _____	Reference No.: _____
Received By: _____	Date Received: _____

